ARIZONA FORM 210

Notice of Assumption of Duties in a Fiduciary Capacity

Complete and mail to: Arizona Department of Revenue, Fiduciary Unit, 1600 West Monroe, Room 520, Phoenix, AZ 85007-2650.

For assistance, call (602) 716-7809 or toll-free from area codes 520 and 928, call (800) 352-4090.

Notice is hereby given of the assumption of duties in a fiduciary capacity in the estate named below pursuant to ARS Section 43-1366.

Section I Decedent Information		
Full Name of Decedent	Decedent's Social Security Number	Decedent's Date of Death
		MM_1DD_1YYYY
	Estate's Federal Employer I.D. Number	Decedent's Date of Birth
		MM_1DD_1YYYY
Full Name of Spouse	Spouse's Social Security Number	If spouse is deceased, Date of Death
		MMDDYYYY
Last known home address of decedent		
Date domicile was established in Arizona:		
(If nonresident, describe Arizona property on a	MMDDYYYY	
Mailing Address – if different from home addre		
Section II Fiduciary Information		
Name of Fiduciary		Telephone Number (with area code)
Address		
Section III Probate Information	- · · · · ·	I=
County in which estate is being probated	Probate Number	Date of Fiduciary's Appointment
Al CAU		M M D D Y Y Y Y
Name of Attorney		Telephone Number (with area code)
Address		
Section IV Estate Information Approximate Value of Entire Gross Estate	Approximate Value of <i>Probate</i> Estate	4
Approximate value of <i>Entire Gross</i> Estate	Approximate value of <i>Probate</i> Estate	
Name, Address, and Social Security Number of	of Beneficiary(ies). Attach extra sheet with add	ditional name(s), address(es), SSN(s).
Section V Termination of Fiduciary I	•	
Complete this section only	if you are terminating a prior notice of a	fiduciary relationship.
If you are terminating a prior notice concerning	g fiduciary relationships on file with the Arizona	a Department of Revenue,
check this box		
Enter the date the fiduciary capacity was terminated		
Signature		
SIGNATURE OF FIDUCIARY	TITLE	DATE
SIGNATURE OF FIDUCIARY	IIILE	DATE

NOTE: Tax information on file with the department is confidential. If the fiduciary wants the department to discuss tax matters with someone other than the fiduciary, the fiduciary must authorize the department to release confidential information to that person. If a fiduciary wishes to authorize an individual to represent or perform certain acts on behalf of the entity, a Power of Attorney must be filed and signed by the fiduciary acting in the position of the taxpayer. Use Arizona Form 285 for this purpose. Form 285 may be filed with Form 210. You may obtain Form 285 from our web site at www.azdor.gov.